

Housemate Compatibility Tool

This tool shall be completed by an individual who is seeking a living situation with housemates, and potential housemates who may have someone move in with them. The tool should be completed by the individual with support as needed from someone who knows the individual well. The information is considered by the planning team in determining compatibility of two or more housemates.

Name _____

Date [Click here to enter a date](#)

Things a potential housemate should know about me: (habits, routines, strong likes/dislikes, supports needs that could affect a housemate's routine, etc.)	Characteristics I like in a potential housemate: (personality, common interests, routines, habits, etc.)	I could not live with someone if they: (what I find annoying or upsetting, anything that would make it unlikely I could live with another person)

A more comprehensive Housemate Survey can be found in the optional forms section of the Support Coordination Manual at:
<http://dmh.mo.gov/dd/manuals/scmanual.html>